PTO/SB/06 (07-06) Approved for use through 1/31/2007, OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/602,574			Filing Date 06/24/2003		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL	ENTITY \square	OR		HER THAN	
Н	FOR		NUMBER FILED		NUMBER EXTRA		Т	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (ci)	N/A		N/A		İ	N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A		Ì	N/A		1	N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		ľ	N/A		1	N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 =				Γ	x \$ =		OR	x s =		
INE	EPENDENT CLAIM CFR 1.16(h))	ıs	minus 3 =		•		Ì	x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawings sheets of paper, the application is \$250 (\$125 for small entity) fo additional 50 sheets or fraction t 35 U.S.C. 41(a)(1)(G) and 37 Cl			e							
	MULTIPLE DEPEN	NDENT CLAIM PF	7 CFR 1.16(j))		L								
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY OR				OTHER THAN SMALL ENTITY	
AMENDMENT	10/15/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT Y EXTRA	ſ		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1 160))	• 27	Minus	·· 32	= 0	٦	ſ	x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	• 5	Minus	•••5	= 0	7	ſ	x \$ =		OR	X \$210=	0	
	Application Size Fee (37 CFR 1.16(s))						ı						
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						ľ			OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2) (Column 3)							
INT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	LY EXTRA			RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(1))		Minus	**		7	Γ	X \$ =		OR	x s =		
Ĭ.	Independent (37 CFR 1,16(h))		Minus	***	-	┑	Ì	x \$ =		OR	x s =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))						ı			1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						Ī			OR			
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
"If the entry is column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Perviouse" part for I'M THIS SPACE is less than 20, enter "20". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 3, enter "20". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 3, enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 3, enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 3, enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 3, enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse" paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse paid For I'M THIS SPACE is less than 30 enter "30". "If the "Highest Number Perviouse paid For I'M THI													

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the LISPTO to process) an application. Confidentiality is overward by 83 USs. C. 122 and 37 CFR. 1.14. This collection is estimated to the 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U. S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.